Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Page 1 of 55 Document

Official Form 1 (1/08) **United States Bankruptcy Court Voluntary Petition** NORTHERN DISTRICT OF ILLINOIS Name of Debtor (if individual, enter Last, First, Middle): Name of Joint Debtor (Spouse)(Last, First, Middle) Trejo, Andres Trejo, Margartia All Other Names used by the Debtor in the last 8 years All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): (include married, maiden, and trade names): NONE NONE Last four digits of Soc. Sec. or Indvidual-Taxpayer I.D. (ITIN) No./Complete EIN Last four digits of Soc. Sec. or Indvidual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): xxx-xx-7913 (if more than one, state all): xxx-xx-7435 Street Address of Debtor (No. & Street, City, and State): Street Address of Joint Debtor (No. & Street, City, and State): 10 Westchester Court 10 Westchester Court Bolingbrook IL Bolingbrook IL ZIPCODE ZIPCODE **60440** 60440 County of Residence or of the County of Residence or of the Principal Place of Business: Principal Place of Business: Wi11 Wi11 Mailing Address of Joint Debtor Mailing Address of Debtor (if different from street address): (if different from street address): SAME ZIPCODE ZIPCODE Location of Principal Assets of Business Debtor
(if different from street address above): NOT APPLICABLE ZIPCODE (if different from street address above): **Nature of Business** Chapter of Bankruptcy Code Under Which Type of Debtor (Form of organization) (Check one box.) the Petition is Filed (Check one box) (Check one box.) Health Care Business Chapter 7 Chapter 15 Petition for Recognition П Chapter 9 of a Foreign Main Proceeding Single Asset Real Estate as defined See Exhibit D on page 2 of this form. П Chapter 11 in 11 U.S.C. § 101 (51B) ☐ Chapter 15 Petition for Recognition Corporation (includes LLC and LLP) П Chapter 12 Railroad of a Foreign Nonmain Proceeding Partnership Chapter 13 Stockbroker Other (if debtor is not one of the above Nature of Debts (Check one box) Commodity Broker entities, check this box and state type of Debts are primarily consumer debts, defined Debts are primarily entity below Clearing Bank in 11 U.S.C. § 101(8) as "incurred by an business debts. Other individual primarily for a personal, family, or household purpose" Tax-Exempt Entity Chapter 11 Debtors: (Check box, if applicable.) Check one box: Debtor is a tax-exempt organization Debtor is a small business as defined in 11 U.S.C. § 101(51D). under Title 26 of the United States Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Code (the Internal Revenue Code) Filing Fee (Check one box) Check if: Debtor's aggregate noncontingent liquidated debts (excluding debts owed Full Filing Fee attached to insiders or affiliates) are less than \$2,190,000. Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Check all applicable boxes: A plan is being filed with this petition Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach Acceptances of the plan were solicited prepetition from one or more signed application for the court's consideration. See Offi cial Form 3B. classes of creditors, in accordance with 11 U.S.C. § 1126(b). THIS SPACE IS FOR COURT USE ONLY Statistical/Administrative Information Debtor estimates that funds will be available for distribution to unsecured creditors. Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors Estimated Number of Creditors 25.001- \boxtimes 1,000-5,001-10,001-50,001-100.000 50-99 100-199 200-999 Over 1-49 50.000 5,000 10.000 25.000 100 000 Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,001 \$1,000,001 \$10,000,001 More than \$50,000,001 \$100,000,001 \$500,000,001 \$50,000 \$500,000 to \$10 to \$500 to \$1 billion \$1 billion \$100,000 to \$1 to \$50 to \$100 million million million million Estimated Liabilities \$500,001 \$0 to \$50,001 to \$100,001 to \$1,000,001 \$10,000,001 \$50,000,001 \$100,000,001 \$500,000,001 \$100,000 \$500,000 to \$10 to \$50 to \$100 to \$500 \$50,000 to \$1 to \$1 billion \$1 billion million million million million

million

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main

Official Form 1 (1/08) Document Page 2 of 55 FORM B1, Page 2

| DOCUITI | CIIL Tage 2 01 33 | FOR | |
|--|--|---|-------------------|
| Voluntary Petition | Name of Debtor(s): Andres Trejo an | d | |
| (This page must be completed and filed in every case) | Margartia Trejo | | |
| All Prior Bankruptcy Cases Filed Within Last 8 Y | ears (If more than two, atta | ach additional sheet) | |
| Location Where Filed: | Case Number: | Date Filed: | |
| NONE | | | |
| Location Where Filed: | Case Number: | Date Filed: | |
| Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of | f this Debtor (If more | than one, attach additional sheet) | |
| Name of Debtor: | Case Number: | Date Filed: | |
| NONE Districts | Relationship: | Tudos | |
| District: | Relationship. | Judge: | |
| Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange | | Exhibit B e completed if debtor is an individual e debts are primarily consumer debts) | |
| Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11) | have informed the petitioner that | named in the foregoing petition, declare the [he or she] may proceed under chapter 7 | , 11, 12 |
| | | ode, and have explained the relief availability that I have delivered to the debtor the n | |
| Exhibit A is attached and made a part of this petition | $\mathbf{I} \mathbf{x}$ | D.T.G | 2/20/2000 |
| | /s/ MICHAEL R. Signature of Attorney for Debtor(| | 3/20/2009 Date |
| | Exhibit C | , | |
| Does the debtor own or have possession of any property that poses or is alle or safety? Yes, and exhibit C is attached and made a part of this petition. No | ged to pose a threat of imminent and | identifiable harm to public health | |
| (To be completed by every individual debtor. If a joint petition is filed, each | Exhibit D a spouse must complete and attach a | separate Exhibit D.) | |
| Exhibit D completed and signed by the debtor is attached and made If this is a joint petition: | part of this petition. | | |
| Exhibit D also completed and signed by the joint debtor is attached a | and made a part of this petition. | | |
| | Regarding the Debtor - Venue | | |
| \ <u></u> | ck any applicable box) | wist for 190 days immediately | |
| Debtor has been domiciled or has had a residence, principal place of bus preceding the date of this petition or for a longer part of such 180 days to | | rict for 180 days immediately | |
| There is a bankruptcy case concerning debtor's affiliate, general partner, | , or partnership pending in this Distri | ict. | |
| Debtor is a debtor in a foreign proceeding and has its principal place of | | | |
| | | ral or state court I in this District or | |
| principal place of business or assets in the United States but is a defenda the interests of the parties will be served in regard to the relief sought in | | iar or state courty in this District, or | |
| the interests of the parties will be served in regard to the relief sought in Certification by a Debtor Who | this District. o Resides as a Tenant of Residenti | | |
| the interests of the parties will be served in regard to the relief sought in Certification by a Debtor Who (Check all a | this District. o Resides as a Tenant of Residential applicable boxes.) | al Property | |
| the interests of the parties will be served in regard to the relief sought in Certification by a Debtor Who | this District. o Resides as a Tenant of Residential applicable boxes.) | al Property | |
| the interests of the parties will be served in regard to the relief sought in Certification by a Debtor Who (Check all a | this District. o Resides as a Tenant of Residential applicable boxes.) | ial Property blete the following.) | |
| the interests of the parties will be served in regard to the relief sought in Certification by a Debtor Who (Check all a | this District. O Resides as a Tenant of Residential applicable boxes.) or's residence. (If box checked, compared to the compared to the checked) | ial Property blete the following.) | |
| the interests of the parties will be served in regard to the relief sought in Certification by a Debtor Who (Check all a | this District. o Resides as a Tenant of Residential applicable boxes.) or's residence. (If box checked, composite of landlord that of landlord that of landlord) (Address of landlord) circumstances under which the debt | blate the following.) btained judgment) or would be permitted to cure the | |
| the interests of the parties will be served in regard to the relief sought in Certification by a Debtor Who (Check all : Landlord has a judgment against the debtor for possession of debtor Debtor claims that under applicable nonbankruptcy law, there are | this District. o Resides as a Tenant of Residential applicable boxes.) or's residence. (If box checked, composite of landlord that of landlord) (Address of landlord) circumstances under which the debt on, after the judgment for possession | blate the following.) blatined judgment) or would be permitted to cure the was entered, and | |

| | ent Page 3 of 55 FORM BI, P | | |
|--|--|--|--|
| Voluntary Petition | Name of Debtor(s): Andres Trejo and | | |
| (This page must be completed and filed in every case) | Margartia Trejo | | |
| | Signatures | | |
| Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this | Signature of a Foreign Representative | | |
| petition is true and correct. | I declare under penalty of perjury that the information provided in this | | |
| [If petitioner is an individual whose debts are primarily consumer debts | petition is true and correct, that I am the foreign representative of a debtor | | |
| and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, | in a foreign proceeding, and that I am authorized to file this petition. | | |
| inderstand the relief available under each such chapter, and choose to proceed under chapter 7. | (Check only one box.) | | |
| If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b) | ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached. | | |
| | ☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the | | |
| request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. | | |
| ${ m X}$ /s/ Andres Trejo | - x | | |
| Signature of Debtor | (Signature of Foreign Representative) | | |
| X /s/ Margartia Trejo Signature of Joint Debtor | (Signature of Foreign Representative) | | |
| | (Printed name of Foreign Representative) | | |
| Telephone Number (if not represented by attorney) | 3/20/2009 | | |
| 3/20/2009 | (Date) | | |
| Date | | | |
| Signature of Attorney* | Signature of Non-Attorney Bankruptcy Petition Preparer | | |
| X /s/ MICHAEL R. RICHMOND Signature of Attorney for Debtor(s) | I declare under penalty of perjury that: (1) I am a bankruptcy petition | | |
| MICHAEL R. RICHMOND 3124632 | I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document | | |
| Printed Name of Attorney for Debtor(s) | and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to | | |
| HELLER & RICHMOND, LTD. | 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by | | |
| Firm Name 33 NORTH DEARBORN STREET Address | bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. | | |
| SUITE 1600 | 1.500 | | |
| CHICAGO IL 60602 | Printed Name and title, if any, of Bankruptcy Petition Preparer | | |
| (312) 781-6700 | - 1 Timest Paine and title, it any, or Dankruptey I ention i repair | | |
| Telephone Number 3/20/2009 | Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, | | |
| Date | responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) | | |
| *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after | ,,, | | |
| an inquiry that the information in the schedules is incorrect. | Address | | |
| Signature of Debtor (Corporation/Partnership) | - | | |
| I declare under penalty of perjury that the information provided in | X | | |
| his petition is true and correct, and that I have been authorized to | | | |
| ile this petition on behalf of the debtor. | Date | | |
| Γhe debtor requests the relief in accordance with the chapter of title | Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above. | | |
| 11, United States Code, specified in this petition. | Names and Social-Security numbers of all other individuals who prepared or | | |
| N/ | assisted in preparing this document unless the bankruptcy petition preparer is not an individual. | | |
| Signature of Authorized Individual | — Indian individual. | | |
| Signature of Authorized Individual | | | |
| Printed Name of Authorized Individual | If more than one person prepared this document, attach additional sheets | | |
| | conforming to the appropriate official form for each person. | | |

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Title of Authorized Individual

3/20/2009

Case 09-09969 Doc 1

Filed 03/24/09 Document

Entered 03/24/09 11:47:20 Desc Main Page 4 of 55

B22A (Official Form 22A) (Chapter 7) (12/08)

| In re | Andres ⁻ | Trejo and Margartia Trejo | | | | |
|--------------|---------------------|---------------------------|--|--|--|--|
| | | Debtor(s) | | | | |
| Case Number: | | | | | | |
| | | (If known) | | | | |

| According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this |
|--|
| ☐ The presumption arises. |
| ☑ The presumption does not arise. |
| ☐ The presumption is temporarily inapplicable. |
| (Check the box as directed in Parts I, III, and VI of this statement.) |

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

| | Part I. MILITARY AND NON-CONSUMER DEBTORS |
|----|--|
| 1A | Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. |
| IA | Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)). |
| 1B | Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. |
| | ☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts. |
| 1C | Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filling a motion raising the means test presumption expires in your case before your exclusion period ends. Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed |
| | a. |

| | | Part II. CALCULATION (| OF MONTHLY INCO | OME FOR § 70 | 7(b)(7) EXCL | LUSI | ON | |
|----|---|---|--|--|----------------------|----------|---------------------------|--------------------------------|
| | | I/filing status. Check the box that applied Jnmarried. Complete only Column A | | | tatement as directed | d. | | |
| | b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income") for Lines 3-11. | | | | | | | |
| 2 | | Married, not filing jointly, without the decl in A ("Debtor's Income") and Column | | | b above. Comp | plete l | both | |
| | d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. | | | | | ne") fo | or | |
| | months of mon | res must reflect average monthly income is prior to filing the bankruptcy case, endi thly income varied during the six months on the appropriate line. | ng on the last day of the mo | nth before the filing. | If the amount | | Column A Debtor's Income | Column E Spouse's Income |
| 3 | Gross | wages, salary, tips, bonuses, overting | ne, commissions. | | | | \$2,000.00 | \$ |
| 4 | Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. | | | | | | | |
| | b. | Ordinary and necessary business expe | enses | \$0.00 | | \dashv | \$0.00 | \$ |
| | C. | Business income | | Subtract Line b fro | m Line a | <u> </u> | | |
| 5 | | appropriate column(s) of Line 5. Do not eart of the operating expenses entered Gross receipts Ordinary and necessary operating exp Rent and other real property income | on Line b as a deduction | | | | \$0.00 | \$ |
| 6 | Interes | st, dividends, and royalties. | | | | | \$0.00 | \$ |
| 7 | Pensio | on and retirement income. | | | | | \$0.00 | \$ |
| 8 | the de | mounts paid by another person or en btor or the debtor's dependents, incl include alimony or separate maintenanc eted. | uding child support paid | for that purpose. | | | \$0.00 | \$ |
| 9 | Howev was a l Columi | ployment compensation. Enter the cr, if you contend that unemployment concenefit under the Social Security Act, do n A or B, but instead state the amount in inployment compensation claimed to benefit under the Social Security Act | not list the amount of such | or your spouse | | | \$0.00 | \$ |
| 10 | separa if Colu Do not | ne from all other sources. Specify te page. Do not include alimony or umn B is completed, but include all ot include any benefits received under the crime against humanity, or as a victim of | her payments of alimony Social Security Act or paym | yments paid by yo or separate mainte ents received as a vi | ur spouse enance. | | | |
| | b. | | | 0 | | | | |
| | Total | and enter on Line 10 | | | | | \$0.00 | \$ |
| 11 | | tal of Current Monthly Income for § 7 n A, and, if Column B is completed, add | | | | | \$2,000.00 | \$ |
| 12 | add Lir | Current Monthly Income for § 707(b)(ne 11, Column A to Line 11, Column B, a eted, enter the amount from Line 11, Colum | and enter the total. If Column | • | | | \$2,250.00 | |

| | Part III. APPLICATION OF § 707(b)(7) EXCLUSION | | | | | |
|----|---|-------------|--|--|--|--|
| 13 | Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result. | \$27,000.00 | | | | |
| 14 | Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: ILLINOIS b. Enter debtor's household size: 5 | \$88,084.00 | | | | |
| 15 | Application of Section 707(b)(7). Check the applicable box and proceed as directed. The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII. The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement. | | | | | |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

| 16 | Enter the amount from Line 12. | | \$ |
|----|--|---|-------------------|
| | Column B that was NOT paid on a regular basis for the dependents. Specify in the lines below the basis for ex spouse's tax liability or the spouse's support of person | e 2.c, enter on Line 17 the total of any income listed in Line 11, ne household expenses of the debtor or the debtor's xcluding the Column B income (such as payment of the ns other than the debtor or the debtor's dependents) and the eary, list additional adjustments on a separate page. If you did | |
| 17 | a. b. | \$ \$ | |
| 17 | | | |
| 17 | b. | \$ |]]] s |

| Part V. CALCULATION OF DEDUCTIONS FROM INCOME | | | | | | | | |
|---|---|--|----|--|--|--|--|--|
| | Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) | | | | | | | |
| 19A | National Standards: food, clothing, and other items. Standards for Food, Clothing and Other Items for the applicable www.usdoj.gov/ust/ or from the clerk of the bankruptcy cour | ` | \$ | | | | | |
| 19B | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. | | | | | | | |
| | Household members under 65 years of age | Household members 65 years of age or older | | | | | | |
| | a1. Allowance per member | a2. Allowance per member | | | | | | |
| | b1. Number of members | b2. Number of members | | | | | | |
| | c1. Subtotal | c2. Subtotal | \$ | | | | | |
| 20A | Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the | | | | | | | |

| 20B | Local Standards: housing and utilities; mortgage/rent expenses. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero. | | | | | |
|-----|--|--|------------------|------------------------------|----|----|
| 200 | a. | IRS Housing and Utilities Standards; mortgage/rental expense | | \$ | | |
| | b. | Average Monthly Payment for any debts secured by your | | | | |
| | | home, if any, as stated in Line 42 | | \$ | | |
| | C. | Net mortgage/rental expense | | Subtract Line b from Line a. | _ | \$ |
| 21 | Lines Hous | I Standards: housing and utilities; adjustment. If you cor 20A and 20B does not accurately compute the allowance to which ying and Utilities Standards, enter any additional amount to which you the basis for your contention in the space below: | ou are entitled | | | \$ |
| | You a | I Standards: transportation; vehicle operation/public transportare entitled to an expense allowance in this category regardless of what a vehicle and regardless of whether you use public transportation. | nether you pay | | | |
| 22A | exper | k the number of vehicles for which you pay the operating expenses on ses are included as a contribution to your household expenses in Li \square 1 \square 2 or more. | | e operating | | |
| | | checked 0, enter on Line 22A the "Public Transportation" amount fr checked 1 or 2 or more, enter on Line 22A the "Operating Costs" a | | | | |
| | Trans | sportation for the applicable number of vehicles in the applicable Met www.usdoj.gov/ust/ or from the sportation for the applicable at www.usdoj.gov/ust/ or from the sportation for the applicable number of vehicles in the applicable Met www.usdoj.gov/ust/ or from the sportation for the applicable number of vehicles in the applicable Met www.usdoj.gov/ust/ or from the sportation for the applicable number of vehicles in the applicable Met www.usdoj.gov/ust/ or from the sportation for the applicable number of vehicles in the applicable Met www.usdoj.gov/ust/ or from the sportation for the applicable number of vehicles in the applicable met www.usdoj.gov/ust/ or from the sportation for the applicable number of vehicles in the applicable met www.usdoj.gov/ust/ or from the sportation for the applicable number of vehicles in the applicable number of vehicle | ropolitan Statis | stical Area or Census | | \$ |
| | Local Standards: transportation; additional public transportation expense. If you pay the operating expenses | | | | | |
| 22B | for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | \$ | |
| | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) | | | | | |
| | ☐ 1 ☐ 2 or more. | | | | | |
| | Fator | in Line a helpy, the "Ownership Coets" for "One Cor" from the IDS | Local Ctando | rda. Transportation | | |
| | Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average | | | | | |
| 23 | Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from | | | | | |
| | Line a | a and enter the result in Line 23. Do not enter an amount les | s than zero. | | | |
| | a. | IRS Transportation Standards, Ownership Costs | \$ | | | |
| | | Average Monthly Payment for any debts secured by Vehicle 1, | Ψ | | | |
| | | as stated in Line 42 | \$ | | | \$ |
| | C. | Net ownership/lease expense for Vehicle 1 | Subtract Line | e b from Line a. | | |
| | Loca | al Standards: transportation ownership/lease expense; Vehicle | 2. | | | |
| | | plete this Line only if you checked the "2 or more" Box in Line 23. | | | | |
| | | , in Line a below, the "Ownership Costs" for "One Car" from the IRS able at www.usdoj.gov/ust/ or from the clerk of the bankruptcy con | | • | | |
| | | verage Monthly Payments for any debts secured by Vehicle 2, as sta | | | | |
| 24 | from | Line a and enter the result in Line 24. Do not enter an amount le | ess than zero | | _ | |
| | a. | IRS Transportation Standards, Ownership Costs | | \$ | | |
| | b. | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 | | \$ | | |
| | C. | Net ownership/lease expense for Vehicle 2 | | Subtract Line b from Line a. | | \$ |

| 25 | | Enter the total average monthly expense that you actually incur than real estate and sales taxes, such as income taxes, self and Medicare taxes. Do not include real estate or sales | | | |
|----|--|---|----|--|--|
| 26 | | ry payroll deductions for employment. Enter the total average monthly our employment, such as retirement contributions, union dues, and uniform costs. | \$ | | |
| 27 | Other Necessary Expenses: life insura pay for term life insurance for yourself. for whole life or for any other form of i | Do not include premiums for insurance on your dependents, | \$ | | |
| 28 | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 44. | | | | |
| 29 | challenged child. Enter the total | on for employment or for a physically or mentally average monthly amount that you actually expend for education that is a on that is required for a physically or mentally challenged dependent ding similar services is available. | \$ | | |
| 30 | Other Necessary Expenses: childcare. childcare - such as baby-sitting, day care, | | \$ | | |
| 31 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. | | | | |
| 32 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service such as | | | | |
| 33 | Total Expenses Allowed under IRS Sta | andards. Enter the total of Lines 19 through 32 | \$ | | |
| | | rt B: Additional Living Expense Deductions ude any expenses that you have listed in Lines 19-32 | 1 | | |
| | | e and Health Savings Account Expenses. List the monthly expenses in the are reasonably necessary for yourself, your spouse, or your dependents. | | | |
| | a. Health Insurance \$ | 3 | | | |
| | | | | | |
| 34 | b. Disability Insurance \$ | 3 | | | |
| | b. Disability Insurance \$ c. Health Savings Account \$ | | | | |
| | c. Health Savings Account \$ Total and enter on Line 34 | | \$ | | |
| | c. Health Savings Account \$ Total and enter on Line 34 If you do not actually expend this total | | \$ | | |
| 35 | c. Health Savings Account \$ Total and enter on Line 34 If you do not actually expend this total space below: \$ Continued contributions to the care of monthly expenses that you will continue to | tal amount, state your actual total average monthly expenditures in the | \$ | | |
| 35 | c. Health Savings Account \$ Total and enter on Line 34 If you do not actually expend this total space below: \$ Continued contributions to the care of monthly expenses that you will continue to elderly, chronically ill, or disabled member unable to pay for such expenses. Protection against family violence. incurred to maintain the safety of your family continued to maintain the safety of your family violence. | tal amount, state your actual total average monthly expenditures in the f household or family members. Enter the total average actual or pay for the reasonable and necessary care and support of an | | | |

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main B22A (Official Form 22A) (Chapter 7) (12/08) - Cont. Document Page 9 of 55

6

| 38 | Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. | | | | | | | |
|----|--|---|--|--|---|----|--|--|
| 39 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. | | | | | | | |
| 40 | Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). | | | | | | | |
| 41 | Total | Additional Expense Ded | uctions under § 707(b). Enter the to | tal of Lines 34 through 40 |) | \$ | | |
| | | | Subpart C: Deductions for | or Debt Payment | | | | |
| | you ov Payme total of filing o | ent, and check whether the f all amounts scheduled as of the bankruptcy case, divi al of the Average Monthly I | ditor, identify the property securing the det e payment includes taxes or insurance. The contractually due to each Secured Crediti ded by 60. If necessary, list additional enti | ot, state the Average Mone Average Monthly Paymo or in the 60 months follow | thly ent is the ving the | | | |
| 42 | | Name of Creditor | Property Securing the Debt | Average Monthly Payment | Does payment include taxes or insurance? | | | |
| 42 | a. | | | \$ | ☐ yes ☐no | | | |
| | b. | | | \$ | ☐ yes ☐no | | | |
| | C. | | | \$ | ☐ yes ☐no | | | |
| | d. | | | \$ | ☐ yes ☐no | | | |
| | e. | | | \$ | ☐ yes ☐no | | | |
| | | | | Total: Add Lines a - e | | \$ | | |
| | reside you main add would | ay include in your deductio ition to the payments listed include any sums in defau | laims. If any of the debts listed in Later property necessary for your support or in 1/60th of any amount (the "cure amount" in Line 42, in order to maintain possession lit that must be paid in order to avoid repostlowing chart. If necessary, list additional enterproperty Securing the Debt | the support of your deper ") that you must pay the conof the property. The cun session or foreclosure. L | ndents, creditor re amount ist and | | | |
| 43 | | Name of Creditor | Property Securing the Debt | | Amount | | | |
| | a. b. | | | \$ | | | | |
| | C. | | | \$ | | | | |
| | d. | | | \$ | | | | |
| | e. | | | \$ | | | | |
| | | | | Total: Add Lines a | - e | \$ | | |
| 44 | as pric | • | ity claims. Enter the total amount, alimony claims, for which you were liable at ions, such as those set out in Line 28. | divided by 60, of all priori | • | \$ | | |

| | moiai | 101111 22A) (611apter 1) (12700) - 0011t. | | • | | |
|----|---|--|--|----|--|--|
| | Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. | | | | | |
| | a. | Projected average monthly Chapter 13 plan payment. | \$ | | | |
| 45 | b. | Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | х | | | |
| | C. | Average monthly administrative expense of Chapter 13 case | Total: Multiply Lines a and b | \$ | | |
| 46 | Tota | I Deductions for Debt Payment. Enter the total of Lines 42 through | ıgh 45. | \$ | | |
| | | Subpart D: Total Deduction | ons from Income | | | |
| 47 | Tota | I of all deductions allowed under § 707(b)(2). Enter the total | of Lines 33, 41, and 46. | \$ | | |
| | | Part VI. DETERMINATION OF § 7 | 07(b)(2) PRESUMPTION | | | |
| 48 | Ente | r the amount from Line 18 (Current monthly income for § 707(b)(| (2)) | \$ | | |
| 49 | Ente | r the amount from Line 47 (Total of all deductions allowed under | § 707(b)(2)) | \$ | | |
| 50 | Mon resul | <i>3</i> • • • • • • • • • • • • • • • • • • • | from Line 48 and enter the | \$ | | |
| 51 | 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result. | | | | | |
| | Initia | Il presumption determination. Check the applicable box and pro | oceed as directed. | | | |
| 52 | page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. | | | | | |
| | The amount on Line 51 is at least \$6,575, but not more than \$10,950. VI (Lines 53 through 55). Complete the remainder of Part | | | | | |
| 53 | Ente | r the amount of your total non-priority unsecured debt | | \$ | | |
| 54 | Thre the re | shold debt payment amount. Multiply the amount in Line 53 lesult. | by the number 0.25 and enter | \$ | | |
| | Secondary presumption determination. Check the applicable box and proceed as directed. | | | | | |
| 55 | the to | ne amount on Line 51 is less than the amount on Line 54. Op of page 1 of this statement, and complete the verification in Part VIII ne amount on Line 51 is equal to or greater than the amount on Line 51 is equal to or greater than the amount on Line 51 is equal to or greater than the amount on Line 51 is equal to or greater than the amount on Line 51 is equal to or greater than the amount on Line 51 is equal to or greater than the amount on Line 54. | ine 54. Check the box for "The presumption | | | |
| | | PART VII. ADDITIONAL EX | XPENSE CLAIMS | | | |
| | healt mont | r Expenses. List and describe any monthly expenses, not otherwise h and welfare of you and your family and that you contend should be an hly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sour average monthly expense for each item. Total the expenses. | n additional deduction from your current | | | |
| 56 | | Expense Description | Monthly Amount | | | |
| | a. | | \$ | | | |
| | b. | | \$ | | | |
| | C. | Total: Add Lines a, b, and c | \$ | | | |
| | | i otal. Add Elliou a, b, alia u | · · | | | |

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main B22A (Official Form 22A) (Chapter 7) (12/08) - Cont. Document Page 11 of 55

Part VIII: VERIFICATION

I declare under penalty of perjury that the information provided in this statement is true and correct. (If this a joint case, both debtors must sign.)

Date: _______Signature: /s/ Andres Trejo

(Debtor)

Date: _______Signature: /s/ Margartia Trejo

(Joint Debtor, if any)

8

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| 1116 | Andres Trejo and | Case No. Chapter 7 |
|------|---------------------|-----------------------|
| | Margartia Trejo | |
| | Debtor(s) | |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

WARNING: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

| Exhibit D. Orleck one of the live statements below and attach any documents as uncered. |
|--|
| 1. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency. |
| 2. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not I have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed. |
| 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] |

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| B 1D (Official F | orka d sestrill 800 (1886) | Doc 1 | Filed 03/24/09 Document | Entered 03/24/09 11:47:20 Page 13 of 55 | Desc Main |
|---------------------|--|---|---|---|-----------|
| ☐ [Must be accom | panied by a motion for dete Incapacity. (Defin so as to be incapable of re Disability. (Define | rmination by a ed in 11 U.S. alizing and m d in 11 U.S.C pate in a crea | the court.] C. § 109 (h)(4) as impairdaking rational decisions w C. § 109 (h)(4) as physical dit counseling briefing in p | se of: [Check the applicable statement] ed by reason of mental illness or mental defici- inith respect to financial responsibilities.); lly impaired to the extent of being unable, afte- person, by telephone, or through the Internet.) | r |
| of 11 U.S.C. § | 5. The United States truste 109(h) does not apply in thi | • | otcy administrator has det | ermined that the credit counseling requiremen | ıt |
| I certify | under penalty of perjury | that the info | ormation provided abov | re is true and correct. | |
| Signature of D | ebtor: /s/ Andres | s Trejo | | | |
| Date: 3/2/ | 1/2000 | | | | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| nre Andres Trejo | | Case No. | |
|-------------------------|-----------|----------|---|
| and | | Chapter | 7 |
| Margartia Trejo | | | |
| | Debtor(s) | | |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

WARNING: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

| Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate |
|--|
| Exhibit D. Check one of the five statements below and attach any documents as directed. |
| , |
| 1. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling |
| agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit |
| counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the |
| services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency. |
| |
| 2. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling |
| agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit |
| counseling and assisted me in performing a related budget analysis, but I do not I have a certificate from the agency describing |
| |
| the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and |
| a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed. |
| |
| 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the |
| services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver |
| of the credit counseling requirement so I can file my bankruptcy case now. |
| [Summarize exigent circumstances here.] |

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| B 1D (Official Form) Exhibit DO | 1969 Doc 1 | Filed 03/24/09 Document | Entered 03/24/09 11:47:2 Page 15 of 55 | 20 Desc Main |
|---|---|---|---|--------------|
| [Must be accompanied by a motion | for determination by a y. (Defined in 11 U.S. able of realizing and m . (Defined in 11 U.S.C | the court.] C. § 109 (h)(4) as impairdaking rational decisions w C. § 109 (h)(4) as physical dit counseling briefing in p | se of: [Check the applicable statement] ed by reason of mental illness or mental de with respect to financial responsibilities.); lly impaired to the extent of being unable, a person, by telephone, or through the Intern | after |
| 5. The United State of 11 U.S.C. § 109(h) does not ap | • | otcy administrator has dete | ermined that the credit counseling requirer | nent |
| I certify under penalty of | perjury that the info | ormation provided abov | e is true and correct. | |
| Signature of Debtor: /s/ Ma | argartia Tre | jo | | |
| Date: 3/20/2009 | | | | |

Rule 2016(b) (8) (a) See 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 16 of 55

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In re | Andres Trejo | | Case No. | |
|-------|--|----------|----------|---|
| | and | | Chapter | 7 |
| | Margartia Trejo | | | |
| | | / Debtor | | |
| | Attorney for Debtor: MICHAEL R. RICHMOND | | | |

STATEMENT PURSUANT TO RULE 2016(B)

| The undersigned | l, pursuant to | Rule 2016 | i(b), Banl | kruptcy | Rules, | states t | hat: |
|-----------------|----------------|-----------|------------|---------|--------|----------|------|
|-----------------|----------------|-----------|------------|---------|--------|----------|------|

- 1. The undersigned is the attorney for the debtor(s) in this case.
- 2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:
- 3. \$ ______of the filing fee in this case has been paid.
- 4. The Services rendered or to be rendered include the following:
 - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
 - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
 - c) Representation of the debtor(s) at the meeting of creditors.
- 5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and

None other

6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and

None other

7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:

None

8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:

None

Dated: 3/20/2009 Respectfully submitted,

X/s/ MICHAEL R. RICHMOND

Attorney for Petitioner: MICHAEL R. RICHMOND
HELLER & RICHMOND, LTD.
33 NORTH DEARBORN STREET
SUITE 1600
CHICAGO IL 60602
(312) 781-6700

UNITED STATES BANKRUPTCY COURT NOTICE TO INDIVIDUAL CONSUMER DEBTOR

The purpose of this notice is to acquaint you with the four chapters of the federal Bankruptcy Code under which you may file a bankruptcy petition. The bankruptcy law is complicated and not easily described. Therefore, you should seek the advice of an attorney to learn of your rights and responsibilities under the law should you decide to file a petition with the court. Court employees are prohibited from giving you legal advice.

Chapter 7: Liquidation (\$155 filing fee plus \$39 administrative fee plus \$15 trustee surcharge)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts.
- 2. Under chapter 7 a trustee takes possession of all your property. You may claim certain of your property as exempt under governing law. The trustee then liquidates the property and uses the proceeds to pay your creditors according to priorities of the Bankruptcy Code.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, your discharge may be denied by the court, and the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a discharge, there are some debts that are not discharged under the law. Therefore, you may still be responsible for such debts as certain taxes and student loans, alimony and support payments, criminal restitution, and debts for death or personal injury caused by driving while intoxicated from alcohol or drugs.
- 5. Under certain circumstances you may keep property that you have purchased subject to valid security interest. Your attorney can expain the options that are available to you.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$155 filing fee plus \$39 administrative fee)

- 1. Chapter 13 is designed for individuals with regular income who are temporarily unable to pay their debts but would like to pay them in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankuptcy Code.
- 2. Under chapter 13 you must file a plan with the court to repay your creditors all or part of the money that you owe them, using your future earnings. Usually, the period allowed by the court to repay your debts is three years, but no more than five years. Your plan must be approved by the court before it can take effect.
- 3. Under chapter 13, unlike chapter 7, you may keep all your property, both exempt and non-exempt, as long as you continue to make payments under the plan.
- 4. After completion of payments under the plan, your debts are discharged except alimony and support payments, student loans, certain debts including criminal fines and restitution and debts for death or personal injury caused by driving while intoxicated from alcohol or drugs, and long term secured obligations.

Chapter 11: Reorganization (\$800 filing fee plus \$39 administrative fee)

Chapter 11 is designed primarily for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family farmer (\$200 filing fee plus \$39 administrative fee)

Chapter 12 is designed to permit family farmers to repay their debts over a period of time from future earnings and is in many ways similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm.

| the debtor, affirm that I have rea | ad this notice. | | |
|------------------------------------|--|------------|-------------|
| 3/20/2009 | /s/Andres Trejo | | |
| Date | Signature of Debtor /s/Margartia Trejo | | Case Number |
| 3/20/2009 | | | |
| Date | Signature of Joi | int Debtor | |
| | DEBTOR COPY (circle one | COURT COPY | |

FORM B6A (Official Form 6A) (1207) Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 18 of 55

| In re Andres Trejo and Margartia Trejo | , Case No |
|--|------------|
| Debtor(s) | (if known) |

SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property | Nature of Debtor's Interest in Property Husband Wife Join Community | tJ Secured Claim or | Amount of Secured Claim |
|--|---|---------------------|----------------------------|
| single family home 10 Westcheste Bolingbrook, IL | Fee Simple | \$ 240,000.00 | \$ 238,863.00 |

TOTAL \$ 240,000.00 (Report also on Summary of Schedules.)

| BGB (Official Form 6) ASB, 09-09969 | Doc 1 | Filed 03/24/09 | Entered 03/24/09 11:47:20 | Desc Main |
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| In re Andres Trejo and Margartia Trejo | . Case No. |
|--|------------|
| Debtor(s) | (if known |

SCHEDULE B-PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| Type of Property | N o n e | | Husband Wife Joint ommunity | W :J | Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption |
|--|------------------|--|--------------------------------------|---------|--|
| 1. Cash on hand. | X | | | | |
| Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Fifth Third Bank checking Location: In debtor's possession | | J | \$ 300.00 |
| Security deposits with public utilities, telephone companies, landlords, and others. | X | | | | |
| Household goods and furnishings, including audio, video, and computer equipment. | | Misc Household Goods and Furnishings Location: In debtor's possession | | J | \$ 3,000.00 |
| Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | x | | | | |
| 6. Wearing apparel. | X | | | | |
| 7. Furs and jewelry. | X | | | | |
| Firearms and sports, photographic, and other hobby equipment. | x | | | | |
| Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | X | | | | |
| 10. Annuities. Itemize and name each issuer. | X | | | | |
| 11. Interest in an education IRA as defined in 26 U.S.C. 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. 521(c).) | X | | | | |
| Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | | |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | | |

B6B (Official Form 6) 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 20 of 55

| In re Andres Trejo and Margartia Trejo | Case No. |
|---|-----------|
| Debtor(s) | (if known |

SCHEDULE B-PERSONAL PROPERTY

| | | (Continuation Sneet) | | |
|---|--------|---------------------------------------|-------------------|---|
| Type of Property | N | Description and Location of Property | | Current Value of Debtor's Interest, |
| | o n | Hu | sbandH WifeW | in Property Without Deducting any Secured Claim or |
| | е | Comm | JointJ nunityC | Exemption |
| 14. Interests in partnerships or joint ventures. Itemize. | X | · · · · · · · · · · · · · · · · · · · | | |
| Government and corporate bonds and other negotiable and non-negotiable instruments. | X | | | |
| 16. Accounts Receivable. | X | | | |
| Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | x | | | |
| Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property. | X | | | |
| Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. Customer lists or other compilations containing personally identifiable information (as described in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. Automobiles, trucks, trailers and other | | 1998 Volvo Tractor | J | \$ 5,000.00 |
| vehicles and accessories. | | Location: In debtor's possession | | |
| | | 2005 GMC Envoy | J | \$ 14,000.00 |
| | | Location: In debtor's possession | | |
| | | 2007 Chevy Cobalt | J | \$ 7,000.00 |
| | | Location: In debtor's possession | | |
| 26. Boats, motors, and accessories. | X | | | |
| | | | | |

| BEB (Official Form 6 ASE) 09-09969 | Doc 1 | Filed 03/24/09 | Entered 03/24/09 11:47:20 | Desc Main |
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| Inre Andres Trejo and Margartia Trejo | . Case No. |
|---------------------------------------|------------|
| Debtor(s) | (if known |

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

| | | (Continuation Chect) | | |
|--|--------|--------------------------------------|-----------|---|
| Type of Property | N | Description and Location of Property | | Current Value of Debtor's Interest, |
| | o n | Husban Wit | eW | in Property Without Deducting any Secured Claim or |
| | е | Joi Communit | ntJ yC | Exemption |
| 27. Aircraft and accessories. | X | · | | |
| 28. Office equipment, furnishings, and supplies. | x | | | |
| 29. Machinery, fixtures, equipment and supplies used in business. | X | | | |
| 30. Inventory. | X | | | |
| 31. Animals. | X | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |
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BGC (Official Form 6 () 1567) 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 22 of 55

| Inre Andres Trejo and Margartia Trejo | Case No. |
|---------------------------------------|-----------|
| Debtor(s) | (if known |

SCHEDULE C-PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | ☐ Check if debtor claims a homestead exemption that exceeds \$136,875. |
|---|--|
| (Check one box) | |

☐ 11 U.S.C. § 522(b) (2) ☐ 11 U.S.C. § 522(b) (3)

| Description of Property | Specify Law Providing each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemptions |
|--|--|----------------------------------|---|
| single family home 10 Westchester Bolingbrook, IL | 735 ILCS 5/12-901 | \$ 1,137.00 | \$ 240,000.00 |
| Fifth Third Bank checking | 735 ILCS 5/12-1001(b) | \$ 300.00 | \$ 300.00 |
| Misc Household Goods and Furnishings | 735 ILCS 5/12-1001(b) | \$ 3,000.00 | \$ 3,000.00 |
| 1998 Volvo Tractor | 735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(d) | \$ 4,800.00 \$ 200.00 | \$ 5,000.00 |
| | | | |
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Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 23 of 55

B6D (Official Form 6D) (12/07)

| In re Andres Trejo and Margartia Trejo | , Case No. |
|--|------------|
| Debtor(s) | (if known) |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| Creditor's Name and Mailing Address Including ZIP Code and Account Number (See Instructions Above.) | Co-Debtor | 0 H W- J | ate Claim was Incurred, Nature f Lien, and Description and Market alue of Property Subject to Lien Husband -Wife Joint Community | Contingent | Unliquidated | Amount of Claim Without Deducting Value of Collateral | Unsecured Portion, If Any |
|--|-----------|-------------------|--|------------|--------------|---|------------------------------|
| Account No: 8282 Creditor # : 1 Citizens Automobile Finance P.O. Box 42002 Providence RI 02940-2002 | | _ | 2005-04-29 Value: \$ 14,000.00 | | | \$ 15,893.00 | \$ 1,893.00 |
| Account No: 3605 Creditor # : 2 COUNTRYWIDE HOME LOANS ATT: BANKRUPTCY DEPT P.O. Box 5170 Simi Valley CA 93062-5170 | | H | 2007-04-13 Value: \$ 240,000.00 | | | \$ 204,307.00 | \$ 0.00 |
| Account No: 7598 Creditor # : 3 Gmac P.o. Box 380901 Bloomington MN 55438 | | H | 2007-06-04 Value: \$ 7,000.00 | | | \$ 7,135.00 | \$ 135.00 |
| 1 continuation sheets attached | | 1 | Suk (Total of (Use only on | f thi | otal \$ | (a) | \$ 2,028.00 |

Schedules.)

Statistical Summary of Certain Liabilities and Related Data) Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 24 of 55

B6D (Official Form 6D) (12/07) - Cont.

| In reAndres Trejo and Margartia Trejo | , | Case No. | |
|---------------------------------------|---|----------|------------|
| Debtor(s) | | | (if known) |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet) **Amount of Claim** Unsecured Date Claim was Incurred, Nature Creditor's Name and **Mailing Address** Without of Lien, and Description and Market Portion, If Any Unliquidated Including ZIP Code and Contingent Value of Property Subject to Lien **Deducting Value** Disputed **Account Number** of Collateral H--Husband (See Instructions Above.) W--Wife J--Joint C--Community \$ 0.00 \$ 34,556.00 Account No: 7700 H 2007-10-28 Creditor # : 4 NATIONAL CITY BANK PO BOX 5570 CLEVELAND OH 44101-0570 Value: \$ 240,000.00 Account No: Value: 1 Sheet no. 1 continuation sheets attached to Schedule of Creditors Subtotal \$ \$ 34,556.00 \$ 0.00 (Total of this page Holding Secured Claims Total \$ \$ 261,891.00 \$ 2,028.00 (Use only on last page)

BGE (Official Form GE) (12/07) 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 25 of 55

In re Andres Trejo and Margartia Trejo

Debtor(s)

Case No.

(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

| uispi | uted, place an X in the column labeled. Disputed. (You may need to place an X in more than one of these three columns.) |
|-------------|---|
| box I | Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules. |
| • | Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to ity listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts rt this total also on the Statistical Summary of Certain Liabilities and Related Data. |
| | Report the total of amounts NOT entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not led to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Individual debtors with primarily consumer s report this total also on the Statistical Summary of Certain Liabilities and Related Data. |
| \boxtimes | Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TYP | PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| | Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| | Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| | Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| | Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| | Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| | Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| | Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| | Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9). |
| | Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |

^{*}Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 26 of 55

B6F (Official Form 6F) (12/07)

| In re Andres Trejo and Margartia Trejo | , | Case No. | |
|--|---|----------|------------|
| Debtor(s) | | | (if known) |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules, and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.) | Co-Debtor | JJ | Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife Joint Community | Contingent | Unliquidated | Disputed | Amount of Claim |
|---|-----------|----------|--|------------|--------------|----------|-----------------|
| Account No: 8926 Creditor # : 1 01 Mosaico Book Club | | H | 2008-02-11 | | | | \$ 112.00 |
| Account No: 8926 Representing: 01 Mosaico Book Club | | | RJM ACQ LLC 575 UNDERHILL BLVD SYOSSET NY 11791 | | | | |
| Account No: 0646 Creditor # : 2 Aronson Furniture 3401 West 47th Street Chicago IL 60632 | | H | 2006-11-09 | | | | \$ 1,455.00 |
| Account No: 0646 Representing: Aronson Furniture | | | MONTEREY COL 4095 AVENIDA DE LA OCEANSIDE CA 92056 | | | | |
| 6 continuation sheets attached | | <u>I</u> | 1 | Sub | tota Tota | | \$ 1,567.00 |

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Page 27 of 55 Document

B6F (Official Form 6F) (12/07) - Cont.

| nre Andres Trejo and Margartia Trejo | , | Case No. |
|--------------------------------------|---|----------|
| Debtor(s) | | |

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| Creditor's Name, Mailing Address | | | Date Claim was Incurred, | | | | Amount of Claim |
|--|-----------|---------|---|------------|--------------|----------|-----------------|
| including Zip Code, | Ď | | and Consideration for Claim. | Ħ | ted | | |
| And Account Number |)eb(| | If Claim is Subject to Setoff, so State. | nge | nida | ted | |
| (See instructions above.) | Co-Debtor | H W- | Husband -Wife | Contingent | Unliquidated | Disputed | |
| | | | Joint Community | S |) | ۵ | |
| Account No: 9792 | | H | T · | | | | \$ 1,568.00 |
| Creditor # : 3 Aronson Furniture 3401 West 47th Street Chicago IL 60632 | | | | | | | |
| Account No: 9792 | | | | | | | |
| Representing: | Ì | | UDS | | | | |
| Aronson Furniture | | | 702 FELIX ST SAINT JOSEPH MO 64501 | | | | |
| Account No: 2753 | | J | 2006-11-20 | | | | \$ 1,416.00 |
| Creditor # : 4 AT&T BANKRUPTCY DEPARTMENT 175 W. Houston PO Box 2933 San Antonio TX 78299-2933 | | | | | | | |
| Account No: 2753 | | | | | | | |
| Representing: AT&T | | | ASSET ACCEPT PO BOX 2036 WARREN MI 48090 | | | | |
| Account No: 9731 | | Н | 2008-11-20 | | | | \$ 14,506.00 |
| Creditor # : 5 BANK OF AMERICA P.O. BOX 15026 Wilmington DE 19850-5026 | | | | | | | |
| Account No: 4747 | | Н | 2008-12-04 | | | | \$ 6,806.00 |
| Creditor # : 6 Bank of America, Headquarters 100 N. Tryon St Bank of America Corporate Cent Charlotte NC 28255 | | | | | | | |
| | | | | | | | |
| Sheet No. <u>1</u> of <u>6</u> continuation sheets attactoreditors Holding Unsecured Nonpriority Claims | ched | to S | chedule of | Subt | ota Γota | ٠. | \$ 24,296.00 |
| - , , | | | (Use only on last page of the completed Schedule F. Report also on Summar and, if applicable, on the Statistical Summary of Certain Liabilities and | y of So | ched | ules | |

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 28 of 55

B6F (Official Form 6F) (12/07) - Cont.

| In re | Andres | Trejo | and | Margartia | Trejo |
|-------|--------|-------|-----|-----------|-------|
|-------|--------|-------|-----|-----------|-------|

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.) Account No: 5550 Creditor # : 7 | Co-Debtor | J | Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife Joint Community 2006-02-10 | Contingent | Unliquidated | Disputed | Amount of Claim |
|---|-----------|-------|---|-------------|--------------|---------------|-----------------|
| Account No: 5550 Representing: Comcast | | | CRD PRT ASSO ONE GALLERIA TOWER DALLAS TX 75240 | | | | |
| Account No: 4243 Creditor # : 8 Commonwealth Edison | | Н | 2007-02-06 | | | | \$ 285.00 |
| Account No: 4243 Representing: Commonwealth Edison | | | NCO FIN /99 POB 41466 PHILADELPHIA PA 19101 | | | | |
| Account No: 2692 Creditor # : 9 EMERGENCY HEALTHCARE PHYSICIAN C/O STATE COLLECTION SERVICES 2509 S. STOUGHTON ROAD Madison WI 53716 | | J | | | | | \$ 303.59 |
| Account No: 2692 Representing: EMERGENCY HEALTHCARE PHYSICIAN | | | STATE COLLECTION SERVICES 2509 S. STOUGHTON ROAD Madison WI 53716 | | | | |
| Sheet No. 2 of 6 continuation sheets attac Creditors Holding Unsecured Nonpriority Claims | hed t | to Sc | chedule of (Use only on last page of the completed Schedule F. Report also on Suand, if applicable, on the Statistical Summary of Certain Liabilitie | mmary of So | Γota ched | al \$ ules | \$ 720.59 |

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 29 of 55

B6F (Official Form 6F) (12/07) - Cont.

| In re | Andres | Trejo | and | <i>Margartia</i> | Trejo |
|-------|--------|-------|-----|------------------|-------|
|-------|--------|-------|-----|------------------|-------|

Debtor(s)

| Case | No. |
|------|-----|
|------|-----|

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.) | Co-Debtor | W J | Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife oint | Contingent | Unliquidated | Disputed | Amount of Claim |
|--|-----------|--------|--|------------|--------------|---------------|-----------------|
| Account No: 0354 Creditor # : 10 JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago IL 60612 | | J | Community | | | | \$ 788.40 |
| Account No: 7495 Creditor # : 11 JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago IL 60612 | | J | | | | | \$ 110.40 |
| Account No: 9117 Creditor # : 12 JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago IL 60612 | | J | | | | | \$ 721.20 |
| Account No: 5616 Creditor # : 13 JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago IL 60612 | | J | | | | | \$ 240.00 |
| Account No: 5616 Representing: JH Stroger Hosp Cook Cty | | | LLINDBARGER GOGGAN BLAIR & SAM ATTORNEYS AT LAW P.O. BOX 06268 Chicago IL 60606-0268 | | | | |
| Account No: 9044 Creditor # : 14 JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago IL 60612 | | J | | | | | \$ 110.40 |
| Sheet No. 3 of 6 continuation sheets attached Creditors Holding Unsecured Nonpriority Claims | ched t | to So | chedule of (Use only on last page of the completed Schedule F. Report also on Su and, if applicable, on the Statistical Summary of Certain Liabilitie | mmary of S | Tota | al \$ ules | \$ 1,970.40 |

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 30 of 55

B6F (Official Form 6F) (12/07) - Cont.

| In re | Andres | Trejo | and | Margartia | Trejo |
|-------|--------|-------|-----|-----------|-------|
|-------|--------|-------|-----|-----------|-------|

Debtor(s)

| Case No. | |
|----------|--|
| | |

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.) | Co-Debtor | J | Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife Joint Community | Contingent | Unliquidated | Disputed | Amount of Claim |
|--|-----------|------|--|------------|--------------|----------|-----------------|
| Account No: 9044 Representing: JH Stroger Hosp Cook Cty | | | LLINDBARGER GOGGAN BLAIR & SAM ATTORNEYS AT LAW P.O. BOX 06268 Chicago IL 60606-0268 | | | | |
| Account No: 1746 Creditor # : 15 JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago IL 60612 | | J | | | | | \$ 116.40 |
| Account No: 1483 Creditor # : 16 MACNEAL HOSPITAL 3249 S. OAK PARK BERWYN, IL 60402 ATTN: PATIENT ACCOUNTS | | H | 2004-10-07 | | | | \$ 153.00 |
| Account No: 1483 Representing: MACNEAL HOSPITAL | | | PARC 350 JIM MORAN BLVD DEERFIELD BEAC FL 33442 | | | | |
| Account No: 2692 Creditor # : 17 Med1 02 Emergency He | | H | 2008-12-18 | | | | \$ 303.00 |
| Account No: 2692 Representing: Med1 02 Emergency He | | | STATE COLLS PO BOX 6250 MADISON WI 53701 | | | | |
| Sheet No. 4 of 6 continuation sheets att Creditors Holding Unsecured Nonpriority Claims | tached t | o So | chedule of (Use only on last page of the completed Schedule F. Report also on Sum and, if applicable, on the Statistical Summary of Certain Liabilities | mary of S | Tota ched | al \$ | \$ 572.40 |

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 31 of 55

B6F (Official Form 6F) (12/07) - Cont.

| In re | Andres | Trejo | and | Margartia | Trejo | |
|-------|--------|-------|-----|-----------|-------|--|
|-------|--------|-------|-----|-----------|-------|--|

Debtor(s)

Case No._

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.) | Co-Debtor | JJ | Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife Oint Community | Contingent | Unliquidated | Disputed | Amount of Claim |
|---|-----------|------|---|-------------|--------------|----------|-----------------|
| Account No: 9429 Creditor # : 18 NATIONAL CITY BANK P.O. BOX 5570 Cleveland OH 44101-0570 | | J | | | | | \$ 8,272.04 |
| Account No: 5924 Creditor # : 19 Nicor Gas 1844 Ferry Road Naperville IL 60563 | | Н | 2005-04-13 | | | | \$ 142.00 |
| Account No: 8043 Creditor # : 20 Sears/cbsd 701 East 60th St N Sioux Falls SD 57117 | | H | 2004-05-17 | | | | \$ 976.00 |
| Account No: 3646 Creditor # : 21 SPRINT PO BOX 8077 London KY 40742 | | Н | 2008-06-10 | | | | \$ 189.00 |
| Account No: 3646 Representing: SPRINT | | | ENHANC RCVRY 8014 BAYBERRY RD JACKSONVILLE FL 32256 | | | | |
| Account No: 8684 Creditor # : 22 Tcf Bank 715 Plainfield Road Willowbrook IL 60527 | | J | 2006-09-22 | | | | \$ 83.00 |
| Sheet No5 of6 continuation sheets att Creditors Holding Unsecured Nonpriority Claims | ached t | o So | chedule of (Use only on last page of the completed Schedule F. Report also on S and, if applicable, on the Statistical Summary of Certain Liabilit | ummary of S | Tot | al \$ | \$ 9,662.04 |

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 32 of 55

B6F (Official Form 6F) (12/07) - Cont.

| In re Andres Trejo and Margartia Trejo | , Case No. |
|--|------------|
| Debtor(s) | (if known) |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.) | | JJ | Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife Joint Community | Contingent | Unliquidated | Disputed | Amount of Claim |
|--|-------|------------|--|------------|--------------|---------------|-------------------------|
| Account No: 8684 Representing: Tcf Bank | _ | U (| PROFESS ACCT 633 W WISCONSIN AV MILWAUKEE WI 53203 | | | | |
| Account No: | | | | | | | |
| Account No: | | | | | | | |
| Account No: | | | | | | | |
| Account No: | | | | | | | |
| Account No: | | | | | | | |
| Sheet No. <u>6</u> of <u>6</u> continuation sheets attached Creditors Holding Unsecured Nonpriority Claims | ed to | o Sc | Chedule of (Use only on last page of the completed Schedule F. Report also on Summary and, if applicable, on the Statistical Summary of Certain Liabilities and | of S | Tota ched | al \$ ules | \$ 0.00 \$ 38,788.43 |

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| 200 (C.1101a) | | Document | Page 33 of 55 | | |

| Inre Andres Trejo and Margartia Trejo | / Debtor | Case No. | |
|---------------------------------------|----------|----------|------------|
| | | _ | (if known) |

SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State the nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☑ Check this box if the debtor has no executory contracts or unexpired leases.

| Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract. | Description of Contract or Lease and Nature of Debtor's Interest. State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract. |
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| In re Andres Trejo and Margartia Trejo | / Debtor | Case No. | |
|--|----------|----------|------------|
| | | _ | (if known) |

SCHEDULE H-CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtors spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☑ Check this box if the debtor has no codebtors.

| Name and Address of Codebtor | Name and Address of Creditor |
|------------------------------|------------------------------|
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| nre Andres Trejo and Margartia Trejo | . , | Case No. | |
|--------------------------------------|-----|----------|------------|
| Debtor(s) | | _ | (if known) |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital | DEPENDENTS OF D | EBTOR AND SPOUSE | | |
|---|--|------------------------|------------------|--------------|
| Status: | RELATIONSHIP(S): | AGE(S): | | |
| Married | daughter | 17 | | |
| | daughter | 14 | | |
| | daughter | 8 | | |
| EMPLOYMENT: | DEBTOR | | SPOUSE | |
| Occupation | truck driver | Housekeeping | | |
| Name of Employer | Jesus Vazquez | Peoples Etc | | |
| How Long Employed | 1 month | 2 mo | | |
| Address of Employer | 4904 W. 29th P1 | 550 Kildeer Dr. | | |
| | Cicero IL 60804 | Bolingbrook IL | 60440 | |
| INCOME: (Estimate of ave | rage or projected monthly income at time case filed) | DEBTOR | | SPOUSE |
| , , | alary, and commissions (Prorate if not paid monthly) | \$ 2,166 | : | 1,473.33 |
| Estimate monthly overtir | me | | .00 \$ | 108.33 |
| 3. SUBTOTAL | CTIONS | \$ 2,166 | .6/ \$ | 1,581.67 |
| LESS PAYROLL DEDU a. Payroll taxes and so | | \$ 0 | .00 \$ | 225.33 |
| b. Insurance | , | \$ 0 | .00 \$ | 0.00 |
| c. Union dues | | | .00 \$ | 0.00 |
| d. Other (Specify): | | <u>*</u> | .00 \$ | 0.00 |
| 5. SUBTOTAL OF PAYRO | DLL DEDUCTIONS | \$ 0 | .00 \$ | 225.33 |
| 6. TOTAL NET MONTHLY | TAKE HOME PAY | \$ 2,166 | .67 \$ | 1,356.33 |
| | peration of business or profession or farm (attach detailed statement) | | .00 \$ | 0.00 |
| Income from real proper Interest and dividends | ty | \$ 0 | .00 \$.00 \$ | 0.00 0.00 |
| | or support payments payable to the debtor for the debtor's use or that | \$ 0 | .00 \$ | 0.00 |
| of dependents listed above | | • | • | |
| 11. Social security or gove | rnment assistance | \$ | 00 f | 0.00 |
| (Specify): 12. Pension or retirement i | ncome | | .00 \$.00 \$ | 0.00 |
| 13. Other monthly income | nome | Ψ | .σσ φ | 0.00 |
| (Specify): | | \$ 0 | .00 \$ | 0.00 |
| 14. SUBTOTAL OF LINES | 7 THROUGH 13 | \$ 0 | .00 \$ | 0.00 |
| 15. AVERAGE MONTHLY | INCOME (Add amounts shown on lines 6 and 14) | \$ 2,166 | . 67 \$ | 1,356.33 |
| 16. COMBINED AVERAGE | MONTHLY INCOME: (Combine column totals | \$ | 3,52 | 23.00 |
| | only one debtor repeat total reported on line 15) | (Report also on Summar | | |

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

| In re Andres Trejo and Margartia Trejo | , Case No. | |
|--|------------|------------|
| Debtor(s) | | (if known) |

SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22 A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

| Rent or home mortgage payment (include lot rented for mobile home) | | 1,805.00 |
|--|----------|----------|
| a. Are real estate taxes included? Yes 🔲 No 🔀 | | |
| b. Is property insurance included? Yes 🔲 No 🔀 | | |
| 2. Utilities: a. Electricity and heating fuel | \$ | 300.00 |
| b. Water and sewer | \$ | 0.00 |
| c. Telephone | \$ | 100.00 |
| d. Other cell phone | \$ | 150.00 |
| Other | \$ | 0.00 |
| | | |
| 3. Home maintenance (repairs and upkeep) | \$ | 0.00 |
| 4. Food | \$ | 700.00 |
| 5. Clothing | \$ | 200.00 |
| 6. Laundry and dry cleaning | \$ | 100.00 |
| | \$ | 0.00 |
| Medical and dental expenses Transportation (not including car payments) | | 0.00 |
| | 4 | 0.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 10. Observised a contributions. 11. Observised a contributions. | s | 0.00 |
| 10. Charitable contributions | Ф | 0.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | <u></u> | 0.00 |
| a. Homeowner's or renter's | | 0.00 |
| b. Life | \$ | 0.00 |
| c. Health | | 0.00 |
| d. Auto | \$ | 0.00 |
| e. Other | \$ | 0.00 |
| Other | \$ | 0.00 |
| | | |
| 12. Taxes (not deducted from wages or included in home mortgage) | | |
| (Specify) | \$ | 0.00 |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | | |
| a. Auto | \$ | 445.00 |
| b. Other: payment on Envoy | \$ | 614.00 |
| c. Other: | \$ | 0.00 |
| | | |
| 14. Alimony, maintenance, and support paid to others | | 0.00 |
| 15. Payments for support of additional dependents not living at your home | \$ | 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | 0.00 |
| 17. Other: | \$ | 0.00 |
| Other: | \$ | 0.00 |
| | | 0.00 |
| 40. AVEDAGE MONTHLY EVDENGEG. Total lines 4.47. Depart also as Commerce of Orbadular | | 4,414.00 |
| 18. AVERAGE MONTHLY EXPENSES Total lines 1-17. Report also on Summary of Schedules | \$ | 4,414.00 |
| and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | | |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: | | |
| | | |
| 20. STATEMENT OF MONTHLY NET INCOME | | 2 502 00 |
| a. Average monthly income from Line 16 of Schedule I | \$ | 3,523.00 |
| b. Average monthly expenses from Line 18 above | \$ | 4,414.00 |
| c. Monthly net income (a. minus b.) | \$ | (891.00) |
| | - | |

UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In re | Andres Trejo | | Case No. | |
|--------|-----------------------------------|------------|----------|---|
| | and | | Chapter: | 7 |
| | Margartia Trejo | | | |
| | | /Debtor(s) | | |
| Attorn | ev For Debtor: MTCHAFT P PTCHMOND | | | |

LIST OF CREDITORS

| # | CREDITOR | CLAIM AND SECURITY | C D S U | CLAIM AMOUNT |
|---|---|--------------------|------------------|--------------|
| 1 | 01 Mosaico Book Club | | | \$ 112.00 |
| 2 | Aronson Furniture 3401 West 47th Street Chicago, IL 60632 | | | \$ 1,455.00 |
| 3 | Aronson Furniture 3401 West 47th Street Chicago, IL 60632 | | | \$ 1,568.00 |
| 4 | AT&T BANKRUPTCY DEPARTMENT 175 W. Houston PO Box 2933 San Antonio, TX 78299-2933 | | | \$ 1,416.00 |
| 5 | BANK OF AMERICA P.O. BOX 15026 Wilmington, DE 19850-5026 | | | \$ 14,506.00 |
| 6 | Bank of America, Headquarters 100 N. Tryon St Bank of America Corporate Cent Charlotte, NC 28255 | | | \$ 6,806.00 |
| 7 | Citizens Automobile Finance P.O. Box 42002 Providence, RI 02940-2002 | | | \$ 15,893.00 |
| 8 | Comcast | | | \$ 132.00 |

| | (Continuation Sheet) | | | | | | |
|----|---|--------------------|---------|---------------|--|--|--|
| # | CREDITOR | CLAIM AND SECURITY | C D S U | CLAIM AMOUNT | | | |
| 9 | Commonwealth Edison | | | \$ 285.00 | | | |
| 10 | COUNTRYWIDE HOME LOANS ATT: BANKRUPTCY DEPT P.O. Box 5170 Simi Valley, CA 93062-5170 | | | \$ 204,307.00 | | | |
| 11 | EMERGENCY HEALTHCARE PHYSICIAN C/O STATE COLLECTION SERVICES 2509 S. STOUGHTON ROAD Madison, WI 53716 | | | \$ 303.59 | | | |
| 12 | Gmac P.o. Box 380901 Bloomington, MN 55438 | | | \$ 7,135.00 | | | |
| 13 | JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago, IL 60612 | | | \$ 721.20 | | | |
| 14 | JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago, IL 60612 | | | \$ 788.40 | | | |
| 15 | JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago, IL 60612 | | | \$ 110.40 | | | |
| 16 | JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago, IL 60612 | | | \$ 110.40 | | | |
| 17 | JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago, IL 60612 | | | \$ 116.40 | | | |
| 18 | JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago, IL 60612 | | | \$ 240.00 | | | |
| 19 | MACNEAL HOSPITAL 3249 S. OAK PARK BERWYN, IL 60402 ATTN:, PATIENT ACCOUNTS | | | \$ 153.00 | | | |

West Group, Rochester, No. 201-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 39 of 55 LIST OF CREDITORS

| (Continuation Sheet) | | | | | | |
|----------------------|---|--------------------|------------------|--------------|--|--|
| # | CREDITOR | CLAIM AND SECURITY | C D S U | CLAIM AMOUNT | | |
| 20 | Med1 02 Emergency He | | | \$ 303.00 | | |
| 21 | NATIONAL CITY BANK P.O. BOX 5570 Cleveland, OH 44101-0570 | | | \$ 8,272.04 | | |
| 22 | NATIONAL CITY BANK PO BOX 5570 CLEVELAND, OH 44101-0570 | | | \$ 34,556.00 | | |
| 23 | Nicor Gas 1844 Ferry Road Naperville, IL 60563 | | | \$ 142.00 | | |
| 24 | Sears/cbsd 701 East 60th St N Sioux Falls, SD 57117 | | | \$ 976.00 | | |
| 25 | SPRINT PO BOX 8077 London, KY 40742 | | | \$ 189.00 | | |
| 26 | Tcf Bank 715 Plainfield Road Willowbrook, IL 60527 | | | \$ 83.00 | | |
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Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In re Andres Trejo | Case No. |
|--------------------|-----------|
| and | Chapter 7 |
| Margartia Trejo | |
| | / Debtor |

Attorney for Debtor: MICHAEL R. RICHMOND

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

| Date: 3/20/2009 | /s/ Andres Trejo |
|-----------------|---------------------|
| | Debtor |
| | /s/ Margartia Trejo |
| | Joint Debtor |

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main ^{01 Mos}BioCurient ^{C1} Page 41 of 55

Aronson Furniture 3401 West 47th Street Chicago, IL 60632

ASSET ACCEPT PO BOX 2036 WARREN, MI 48090

AT&T
BANKRUPTCY DEPARTMENT
175 W. Houston PO Box 2933
San Antonio, TX 78299-2933

BANK OF AMERICA
P.O. BOX 15026
Wilmington, DE 19850-5026

Bank of America, Headquarters 100 N. Tryon St Bank of America Corporate Cent Charlotte, NC 28255

Citizens Automobile Finance P.O. Box 42002 Providence, RI 02940-2002

Comcast

Commonwealth Edison

COUNTRYWIDE HOME LOANS ATT: BANKRUPTCY DEPT P.O. Box 5170 Simi Valley, CA 93062-5170

CRD PRT ASSO
ONE GALLERIA TOWER
DALLAS, TX 75240

EMERGENCY HEALTHCARE PHYSICIAN C/O STATE COLLECTION SERVICES 2509 S. STOUGHTON ROAD Madison, WI 53716

ENHANC RCVRY 8014 BAYBERRY RD JACKSONVILLE, FL 32256

Gmac P.o. Box 380901 Bloomington, MN 55438

JH Stroger Hosp Cook Cty 1900 W. Polk Street suite G-9 Chicago, IL 60612

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main LLINDB Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main

ATTORNEYS AT LAW
P.O. BOX 06268
Chicago, IL 60606-0268

MACNEAL HOSPITAL
3249 S. OAK PARK
BERWYN, IL 60402
ATTN:, PATIENT ACCOUNTS

Med1 02 Emergency He

MICHAEL R. RICHMOND 33 NORTH DEARBORN STREET SUITE 1600 CHICAGO, IL 60602

MONTEREY COL 4095 AVENIDA DE LA OCEANSIDE, CA 92056

NATIONAL CITY BANK
PO BOX 5570
CLEVELAND, OH 44101-0570

NATIONAL CITY BANK P.O. BOX 5570

Cleveland, OH 44101-0570

NCO FIN /99 POB 41466 PHILADELPHIA, PA 19101

Nicor Gas 1844 Ferry Road Naperville, IL 60563

PARC
350 JIM MORAN BLVD
DEERFIELD BEAC, FL 33442

PROFESS ACCT
633 W WISCONSIN AV
MILWAUKEE, WI 53203

RJM ACQ LLC 575 UNDERHILL BLVD SYOSSET, NY 11791

Sears/cbsd 701 East 60th St N Sioux Falls, SD 57117

SPRINT PO BOX 8077 London, KY 40742

STATE COLLECTION SERVICES 2509 S. STOUGHTON ROAD Madison, WI 53716

Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main STATE Doctment Page 43 of 55 PO BOX 6250

MADISON, WI 53701

INDISON, WI 33701

Tcf Bank 715 Plainfield Road Willowbrook, IL 60527

Andres Trejo 10 Westchester Court Bolingbrook, IL 60440

Margartia Trejo 10 Westchester Court Bolingbrook, IL 60440

UDS 702 FELIX ST SAINT JOSEPH, MO 64501 B 8 (Official Form 8) (Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 44 of 55

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| nre Andres Trejo and Margartia Trejo | Case No. |
|--------------------------------------|-----------|
| | Chapter 7 |
| | |
| | |
| | |
| | / Debtor |

CHAPTER 7 STATEMENT OF INTENTION - HUSBAND'S DEBTS

Part A - Debts Secured by property of the estate. (Part A must be completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

| Property No. 1 | |
|--|--|
| Creditor's Name: COUNTRYWIDE HOME LOANS | Describe Property Securing Debt: single family home 10 Westchester Bolingbrook, IL |
| Property will be (check one): Surrendered | |
| ☐ Reaffirm the debt ☐ Other. Explain Property is (check one): ☐ Claimed as exempt ☐ Not claimed as exempt | (for example, avoid lien using 11 U.S.C § 522 (f)). |
| Property No. 2 | |
| Creditor's Name : Gmac | Describe Property Securing Debt : 2007 Chevy Cobalt |
| Property will be (check one): Surrendered Retained If retaining the property, I intend to (check at least one): Redeem the property | |
| Reaffirm the debt Other. Explain Property is (check one): Claimed as exempt Not claimed as exempt | (for example, avoid lien using 11 U.S.C § 522 (f)). |

B 8 (Official Form 8) (Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 45 of 55 Property No. 3 Creditor's Name: **Describe Property Securing Debt:** NATIONAL CITY BANK single family home 10 Westchester Bolingbrook, IL Property will be (check one): Surrendered Retained If retaining the property, I intend to (check at least one): Redeem the property Reaffirm the debt Other. Explain (for example, avoid lien using 11 U.S.C § 522 (f)). Property is (check one): Claimed as exempt Not claimed as exempt Part B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.) Property No. Lessor's Name: **Describe Leased Property:** Lease will be assumed pursuant to 11 U.S.C. § None 365(p)(2): \square No Yes Signature of Debtor(s) I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease. Date: 3/20/2009 Debtor: /s/ Andres Trejo

B 8 (Official Form 8) (Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 46 of 55

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| nre Andres Trejo and Margartia Tre j | io | Case No. Chapter 7 |
|---|--|---|
| | | ebtor |
| CHAPTER 7 ST | ATEMENT OF INTENTION - W | VIFE'S DEBTS |
| Part A - Debts Secured by property of the estate. (Pa additional pages if necessary.) | rt A must be completed for EACH debt which is s | secured by property of the estate. Attach |
| Property No. | | |
| Creditor's Name : None | Describe Property S | Securing Debt : |
| Property will be (check one): Surrendered Retained If retaining the property, I intend to (check at least one): Redeem the property Reaffirm the debt Other. Explain | | (for example, avoid lien using 11 U.S.C § 522 (f)). |
| Property is (check one) : Claimed as exempt Not claimed as ex | xempt | |
| Part B - Personal property subject to unexpired leases additional pages if necessary.) Property No. | s. (All three columns of Part B must be complete | d for each unexpired lease. Attach |
| Lessor's Name: | Describe Leased Property: | Lease will be assumed pursuant to 11 U.S.C. § |
| None | | 365(p)(2): ☐ Yes ☐ No |
| | Signature of Debtor(s) | |

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

| Data: | 3/20/2009 | loint Dobtor: | /s/ Margartia Trejo |
|-------|-----------|---------------|---------------------|
| Date. | 3/20/2009 | John Debior. | /s/ Margartia Trejo |

B 8 (Official Form 8) (Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 47 of 55

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| | LAS | IERN DIVISION | |
|--|--|---|--|
| re Andres Trejo and Margar | tia Trejo | | Case No. Chapter 7 |
| | | / Debtor | |
| | | NT OF INTENTION - JOIN completed for EACH debt which is secure | |
| operty No. 1 | | | |
| reditor's Name: Citizens Automobile Financ | ce | Describe Property Secur 2005 GMC Envoy | ing Debt : |
| retaining the property, I intend to (check at let Redeem the property Reaffirm the debt Other. Explain | east one) : | (for e | example, avoid lien using 11 U.S.C § 522 (f)). |
| roperty is (check one) : Claimed as exempt Not | t claimed as exempt | | |
| Part B - Personal property subject to ur additional pages if necessary.) | nexpired leases. (All three c | olumns of Part B must be completed for e | ach unexpired lease. Attach |
| essor's Name: | Describe | e Leased Property: | Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): |
| | | | ☐ Yes ☐ No |
| I declare under penalty of perjury tha personal property subject to an unex ate: <u>3/20/2009</u> | t the above indicates my pired lease. | ature of Debtor(s) intention as to any property of my est Andres Trejo | |
| ate: 3/20/2009 | Joint Debto | : /s/ Margartia Treio | |

Form 7 (12/07) Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main

Document Page 48 of 55 UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS **EASTERN DIVISION**

In re: Andres Trejo and Margartia Trejo Case No.

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not diclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor my also be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporation debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. §101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

Year to date: \$2,500 approx husband's income

Last Year: \$34,476 net

income

Year before: \$38,523 net

income

Year to date: \$1,300 approx wife's income

Last Year: \$7,257 Year before: \$5,715

Statement of Affairs - Page 1

Form 7 (12/07) Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 49 of 55

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor, made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

Creditor: SEARS 0 \$1,000

Address:

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filingunder chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| orm 7 (12/07) | Case 09-09969 | Doc 1 | Filed 03/24/09 | Entered 03/24/09 11:47:20 | Desc Main |
|---------------|---------------|-------|----------------|---------------------------|-----------|
| (12/01) | | | Document | Page 50 of 55 | |

6. Assignments and receiverships

None

F

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT,

NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR

DESCRIPTION AND VALUE OF PROPERTY

\$1,500.00

Payee: HELLER & RICHMOND,

LTD.

Address:

33 NORTH DEARBORN STREET SUITE 1600

CHICAGO, IL 60602

Date of Payment: Payor: Andres Trejo

10. Other transfers

None

None

X

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a benificiary.

Form 7 (12/07) Case 09-09969 Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 51 of 55

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

None

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to disposal sites.

"Hazardous Material" means anything defined as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar termunder an Environmental Law:

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

| Form 7 | (12/07) Case 09-09969 | Doc 1 Filed 03/24/09 Entered 03/24/09 11:47:20 Desc Main Document Page 52 of 55 |
|----------|---|---|
| None | b. List the name and address of ev governmental unit to which the notice wa | ery site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the as sent and the date of the notice. |
| None | | ceedings, including settlements or orders, under any Environmental Law, with respect to which the debtor is or was a party. evernmental unit that is or was a party to the proceeding, and the docket number. |
| None | businesses in which the debtor was self-employed in a trade, profession, of the debtor owned 5 percent or more of the | the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which he voting or equity securities within six years immediately preceding the commencement of this case |
| | | list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the |
| | · · · · · · · · · · · · · · · · · · · | list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the |
| | | |
| None | b. Identify any business listed in respons | se to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101. |
| [If comp | oleted by an individual or individual and | d spouse] |
| | e under penalty of perjury that I have retrue and correct. | ead the answers contained in the foregoing statement of financial affairs and any attachments thereto and that |
| [| Date 3/20/2009 | Signature /s/ Andres Trejo of Debtor |
| [| Date 3/20/2009 | Signature /s/ Margartia Trejo of Joint Debtor (if any) |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In re Andres Trejo and Margartia Trejo | | Case No. | |
|---|----------|----------|---|
| | | Chapter | 7 |
| | / Debtor | | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data"if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | Attached (Yes/No) | No. of Sheets | ASSETS | LIABILITIES | OTHER |
|---|----------------------|------------------|------------------|------------------|----------------|
| A-Real Property | Yes | 1 | \$ 240,000.00 | | |
| B-Personal Property | Yes | 3 | \$ 29,300.00 | | |
| C-Property Claimed as Exempt | Yes | 1 | | | |
| D-Creditors Holding Secured Claims | Yes | 2 | | \$ 261,891.00 | |
| E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | \$ 0.00 | |
| F-Creditors Holding Unsecured Nonpriority Claims | Yes | 7 | | \$ 38,788.43 | |
| G-Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H-Codebtors | Yes | 1 | | | |
| I-Current Income of Individual Debtor(s) | Yes | 1 | | | \$ 3,523.00 |
| J-Current Expenditures of Individual Debtor(s) | Yes | 1 | | | \$ 4,414.00 |
| ТОТ | 19 | \$ 269,300.00 | \$ 300,679.43 | | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In re <i>Andres</i> | Trejo | and | Margartia | Trejo | | | Case No. | |
|---------------------|-------|-----|-----------|-------|--|--|----------|---|
| | | | | | | | Chapter | 7 |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C § 159)

/ Debtor

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|---------|
| Domestic Support Obligations (from Schedule E) | \$ 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00 |
| Student Loan Obligations (from Schedule F) | \$ 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ 0.00 |
| TOTAL | \$ 0.00 |

State the following:

| Average Income (from Schedule I, Line 16) | \$ 3,523.00 |
|--|-------------|
| Average Expenses (from Schedule J, Line 18) | \$ 4,414.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | \$ 2,250.00 |

State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 2,028.00 |
|--|---------|--------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | | \$ 38,788.43 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$ 40,816.43 |

Document

Page 55 of 55

Case No. In re Andres Trejo and Margartia Trejo (if known) Debtor

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY AN INDIVIDUAL DEBTOR

| I declare under penalty of perjur correct to the best of my knowle | y that I have read the foregoing summary and schedules, consisting of dge, information and belief. | sheets, and that they are true and |
|---|--|------------------------------------|
| Date: | Signature /s/ Andres Trejo | |
| | Andres Trejo | |
| Date: | Signature /s/ Margartia Trejo | |
| | Margartia Trejo | |
| | [If joint case, both spouses must sign.] | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.